



Zoning Variance Application

☐ Albany, GA ☐ Dougherty County

Address of Property: _____

Name of Property Owner(s): _____

Mailing Address: _____ Telephone #: _____

Name of Applicant: _____

Mailing Address: _____ Telephone #: _____

Large maps submitted with application should have an 8½" X 11" copy attached.

If the applicant is not the current owner of the property, the applicant must attach a completed Verification of Ownership authorizing the filing of this application.

Requested Action:

I request that the Albany Dougherty Planning Commission grant a zoning variance which will allow: _____, which will not comply with the provisions of the zoning ordinance.

- | | | |
|---|-------|------------------|
| 1. Front/Side/Rear setback: | _____ | instead of _____ |
| 2. Number of off-street parking spaces: | _____ | instead of _____ |
| 3. Maximum % of gross lot area: | _____ | instead of _____ |
| 4. Height: | _____ | instead of _____ |
| 5. Other: | _____ | instead of _____ |

The reason for this request: _____

Current zoning district: _____ (Please provide an 11' X 17" drawing of proposed site plan for the property).

Name of Subdivision (if applicable): _____

Lot # _____ Block #: _____ Subdivision Recorded – Cabinet Bk. _____, Slide _____

Size of property (acres/sq. ft.) _____

This application must be filed by the 10th of the month to be considered for the meeting of the following month.

I hereby authorize the Planning & Development Services staff to inspect the premises of the above described property and to place a public notice sign on the premises as required by law. I also hereby depose and say that all statements herein, and attached statements submitted are true and accurate to the best of my knowledge and belief.

Sworn to and subscribed before me this _____ day of _____, 20_____.

Signature of applicant: _____

Notary Public: _____ My commission expires: _____

(Staff Use)

Posting fee: _____ Date paid: _____ Receipt #: _____

PLANNING, DEVELOPMENT SERVICES & CODE ENFORCEMENT

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